

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type:: REGULAR
Subject Matter:: UTILITY
CD-ROM or CD-R?: NONE
Title:: CYCLIC TETRAPEPTIDE COMPOUND
AND USE THEREOF
Attorney Docket Number:: 255015US0PCT
Total Drawing Sheets:: 3

INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Shigeki
Family Name:: SATOH
City of Residence:: Osaka
Country of Residence:: Japan
Street of Mailing Address:: c/o Fujisawa Pharmaceutical Co., Ltd., 4-
7, Doshomachi 3-chome, Chuo-ku,
Osaka-shi
City of Mailing Address:: Osaka
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 541-8514

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Yasuharu
Family Name:: URANO
City of Residence:: Osaka
Country of Residence:: Japan
Street of Mailing Address:: c/o Fujisawa Pharmaceutical Co., Ltd., 4-
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Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 541-8514

DT04 Rec'd PCT/PTO 25 JUN 2004

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Kazuhiko
Family Name::	OSODA
City of Residence::	Osaka
Country of Residence::	Japan
Street of Mailing Address::	c/o Fujisawa Pharmaceutical Co., Ltd., 4-7, Doshomachi 3-chome, Chuo-ku, Osaka-shi
City of Mailing Address::	Osaka
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	541-8514
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Mitsuru
Family Name::	HOSAKA
City of Residence::	Osaka
Country of Residence::	Japan
Street of Mailing Address::	c/o Fujisawa Pharmaceutical Co., Ltd., 4-7, Doshomachi 3-chome, Chuo-ku, Osaka-shi
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Postal or Zip Code of Mailing Address::	541-8514
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Kozo
Family Name::	SAWADA
City of Residence::	Osaka
Country of Residence::	Japan
Street of Mailing Address::	c/o Fujisawa Pharmaceutical Co., Ltd., 4-7, Doshomachi 3-chome, Chuo-ku, Osaka-shi
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Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Takayuki
Family Name::	INOUE
City of Residence::	Osaka
Country of Residence::	Japan
Street of Mailing Address::	c/o Fujisawa Pharmaceutical Co., Ltd., 4-7, Doshomachi 3-chome, Chuo-ku, Osaka-shi
City of Mailing Address::	Osaka
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	541-8514
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Hiroaki
Family Name::	MORI
City of Residence::	Osaka
Country of Residence::	Japan
Street of Mailing Address::	c/o Fujisawa Pharmaceutical Co., Ltd., 4-7, Doshomachi 3-chome, Chuo-ku, Osaka-shi
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Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Shoji
Family Name::	TAKAGAKI
City of Residence::	Osaka
Country of Residence::	Japan
Street of Mailing Address::	c/o Fujisawa Pharmaceutical Co., Ltd., 4-7, Doshomachi 3-chome, Chuo-ku, Osaka-shi
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Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Takao
Family Name:: FUJIMURA
City of Residence:: Osaka
Country of Residence:: Japan
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Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Hideaki
Family Name:: MATSUOKA
City of Residence:: Osaka
Country of Residence:: Japan
Street of Mailing Address:: c/o Fujisawa Pharmaceutical Co., Ltd., 4-7, Doshomachi 3-chome, Chuo-ku, Osaka-shi

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Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Katsuhiko
Family Name:: YOSHIZAWA
City of Residence:: Osaka
Country of Residence:: Japan
Street of Mailing Address:: c/o Fujisawa Pharmaceutical Co., Ltd., 4-7, Doshomachi 3-chome, Chuo-ku, Osaka-shi

City of Mailing Address:: Osaka
Country of Mailing Address:: Japan
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CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/JP02/13754	12/27/02

FOREIGN PRIORITY INFORMATION

Application Number:	Country::	Filing Date::	Priority Claimed::
PR 9779	Australia	12/28/01	YES
2002952117	Australia	10/10/02	YES

ASSIGNMENT INFORMATION

Assignee Name:: Fujisawa Pharmaceutical Co. Ltd.
Street of Mailing Address:: 4-7, Doshomachi 3-chome, Chuo-ku,
Osaka-shi
City of Mailing Address:: Osaka
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